

117TH CONGRESS  
2D SESSION

# S. 5272

To amend title XVIII of the Social Security Act to expand access to psychological and behavioral services.

---

IN THE SENATE OF THE UNITED STATES

DECEMBER 15, 2022

Mr. BROWN (for himself and Ms. COLLINS) introduced the following bill;  
which was read twice and referred to the Committee on Finance

---

## A BILL

To amend title XVIII of the Social Security Act to expand access to psychological and behavioral services.

1       *Be it enacted by the Senate and House of Representa-*  
2       *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4       This Act may be cited as the “Increasing Mental  
5       Health Options Act of 2022”.

6 **SEC. 2. EXPANDING ELIGIBILITY FOR INCENTIVES TO**  
7                   **PRACTICE IN RURAL AND UNDERSERVED**  
8                   **AREAS.**

9       Section 1833(m) of the Social Security Act (42  
10      U.S.C. 1395l(m)) is amended—

1                   (1) in paragraph (1)—

2                   (A) by inserting “(A)” before “In the  
3                   case”; and

4                   (B) by adding at the end the following new  
5                   subparagraph:

6                 “(B) In the case of services furnished by a clinical  
7                   psychologist (as defined by the Secretary for purposes of  
8                   section 1861(ii)) in a year to an individual, who is covered  
9                   under the insurance program established by this part and  
10                  who incurs expenses for such services, in an area that is  
11                  designated (under section 332(a)(1)(A) of the Public  
12                  Health Service Act) as a health professional shortage area  
13                  as identified by the Secretary prior to the beginning of  
14                  such year, in addition to the amount otherwise paid under  
15                  this part, there also shall be paid to the clinical psycholo-  
16                  gist (or to an employer or facility in the cases described  
17                  in clause (A) of section 1842(b)(6)) (on a monthly or  
18                  quarterly basis) from the Federal Supplementary Medical  
19                  Insurance Trust Fund an amount equal to 10 percent of  
20                  the payment amount for the service under this part”; and

21                 (2) in paragraph (2), by inserting “or clinical  
22                 psychologist” after “physician”.

1   **SEC. 3. ELIMINATING UNNECESSARY OVERSIGHT AND AP-**  
2                   **PROVAL REQUIREMENTS FOR BEHAVIORAL**  
3                   **HEALTH SERVICES PROVIDED BY CLINICAL**  
4                   **PSYCHOLOGISTS.**

5       (a) **COMPREHENSIVE OUTPATIENT REHABILITATION**  
6 **FACILITIES.**—Section 1835(a)(2)(E)(iii) of the Social Se-  
7 curity Act (42 U.S.C. 1395n(a)(2)(E)(iii)) is amended by  
8 inserting “, except that an individual receiving qualified  
9 psychologist services as described in section 1861(ii) may  
10 be under the care of a clinical psychologist with respect  
11 to such services to the extent authorized under State law”  
12 before the semicolon.

13     (b) **SKILLED NURSING FACILITIES.**—Section  
14 1819(b) of such Act (42 U.S.C. 1395i–3(b)) is amended—  
15           (1) in paragraph (5)(G), by inserting “clinical  
16 psychologist,” after “nurse practitioner,”; and

17           (2) in paragraph (6)(A), by inserting “, except  
18 that a resident receiving qualified psychologist serv-  
19 ices as described in section 1861(ii) may be under  
20 the supervision of a clinical psychologist with respect  
21 to such services to the extent authorized under State  
22 law” before the semicolon.

23     (c) **PARTIAL HOSPITALIZATION SERVICES.**—

24           (1) Section 1835(a)(2)(F)(iii) of the Social Se-  
25 curity Act (42 U.S.C. 1395n(a)(2)(F)(iii)) is amend-  
26 ed by inserting “, except that an individual receiving

1 qualified psychologist services as described in section  
2 1861(ii) may be under the care of a clinical psychol-  
3 ogist with respect to such services to the extent au-  
4 thorized under State law” before the period.

5 (2) Section 1861(ff)(1) of such Act (42 U.S.C.  
6 1395x(ff)(1)) is amended by inserting “(or, in the  
7 case of qualified psychologist services, under the su-  
8 pervision of a clinical psychologist to the extent au-  
9 thorized under State law)” after “under the super-  
10 vision of a physician”.

11 (d) HOME HEALTH SERVICES.—

12 (1) Section 1861(m) of such Act (42 U.S.C.  
13 1395x(m)) is amended—

14 (A) in paragraph (6), by striking “and” at  
15 the end;

16 (B) in paragraph (7), by inserting “and”  
17 after the semicolon; and

18 (C) by inserting after paragraph (7) the  
19 following new paragraph:

20 “(8) an individual receiving qualified psycholo-  
21 gist services may be under the care of a clinical psy-  
22 chologist with respect to such services to the extent  
23 authorized under State law.”.

**4 (e) INPATIENT PSYCHIATRIC HOSPITAL SERVICES.—**

5 Section 1814(a)(2)(A) of such Act (42 U.S.C.  
6 1395f(a)(2)(A)) is amended by inserting “(or, in the case  
7 of qualified psychologist services, under the supervision of  
8 a clinical psychologist to the extent authorized under State  
9 law)” after “under the supervision of a physician”.

10 (f) RULE OF CONSTRUCTION.—In accordance with

11 section 410.71(e) of title 42, Code of Federal Regulations  
12 (or any successor regulation), nothing in the provisions of,  
13 and amendments made by, this section shall be construed  
14 as changing or eliminating existing requirements regard-  
15 ing clinical consultation by clinical psychologists with a  
16 beneficiary's physician, in accordance with accepted pro-  
17 fessional ethical norms and taking into consideration pa-  
18 tient confidentiality.

1